

**THE STATE OF NEW HAMPSHIRE
BOARD OF TAX AND LAND APPEALS
STATE OFFICE PARK SOUTH
107 PLEASANT STREET
CONCORD NH 03301**

v.

Docket No.: _____

WITHDRAWAL OF APPEARANCE

Please withdraw my appearance as attorney or representative for:

Name: _____

Address: _____

Telephone: _____

Signature: _____

I certify:

- (1) A copy of this withdrawal was mailed/hand delivered to the party I represent and all other parties or their attorney or representative on the date signed below;
- (2) The party's address above is a current address; and
- (3) There are no pending motions or hearings.

Date: _____

Attorney/Representative Name: _____

Address: _____

Telephone: _____

Notice to Represented Party and Opposing Party

You have 10 days from the date written by the withdrawing party to file an objection.